

10-20-03

AF/3624
PATENT

10/20/03



Practitioner's Docket No. D-1132 R

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **Dale Blackson, et al.**

Confirmation No.: 9612

Application No.: **09/776,503**

Art Unit: 3624

Filed: **February 2, 2001**

Examiner: **Geoffrey R. Akers**

Title: **System and Method for Dispensing Digital
Information from an Automated Transaction Machine**

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Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. 1.191)**

Applicants hereby appeal to the Board from the decision of the Primary Examiner, mailed July 18, 2003, rejecting claims 1-86.

1. STATUS OF APPLICANT

This application is on behalf of other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

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☒ deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to Box AF, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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Express Mail Label No.: EL998959805US

Signature

Ralph E. Jocke

(type or print name of person certifying)

Date: **10/17/2003**

2. FEE FOR FILING NOTICE OF APPEAL

Pursuant to 37 C.F.R. 1.17(b), the fee for filing the Notice of Appeal is:

Other than a small entity \$330.00

Notice of Appeal fee due \$330.00

3. EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R.1.136 apply.

Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

4. TOTAL FEE DUE

The total fee due is:

Notice of Appeal fee \$330.00

TOTAL FEE DUE \$330.00

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5. FEE PAYMENT

Charge Account No. 09-0428 (Interbold) the sum of \$330.00

A duplicate of this transmittal is attached.

6. FEE DEFICIENCY

If any additional extension and/or fee is required, this is a request therefor and to charge Account No. 09-0428 (Interbold).

If any additional fee for claims is required, charge Account No. 09-0428 (Interbold).


SIGNATURE OF PRACTITIONER

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